



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E415004**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input checked="" type="checkbox"/>

TRIBAL RESERVATION ☐

CASE # **15-00881**

LOCAL AGENCY CODING

TOTAL # OF UNITS **03** OBJECT STRUCK **CONCRETE/JERSEY BARRIER**

DATE OF COLLISION **04** - **03** - **2015** TIME (2400) **1905** COUNTY # **31** MILES **0664** CITY # **0664**

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☒
81ST AVE NE BLOCK NO. ☒ **300**

DISTANCE **150** **00** MILES ☐ N ☒ E ☐ S ☒ W **3RD ST NE**

UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE **D: 4253306437**

LAST NAME **LANT** FIRST NAME **JACLYN** MIDDLE INITIAL **C**

STREET NEW ADDRESS **704 87TH AVE NE #51**

CITY **LAKE STEVENS** ST **WA** ZIP **98258**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **LANT*JC146NH** STATE **WA** SEX **F** D.O.B. **08** - **08** - **1986**

ON DUTY ☐ STATUS **9** AIRBAG **9** RESTR. **9** EJECT **1** HELMET USE **9** INJURY CLASS **0** NATURE OF INJURIES

LICENSE PLATE # **AHM4943** STATE **WA** VIN# **1G2JB12F747118036**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2004** MAKE **PONT** MODEL **SUNFIR** STYLE **CP** VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **JACLYN LANT 704 87TH AVE NE #51 LAKE STEVENS WA 98258**

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **VERN FONK 200285561-00** CITATION # **5Z0471040** CHARGE **HIT AND RUN**



UNIT 02 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE

LAST NAME **UNKNOWN** FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS

CITY ST ZIP

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # STATE SEX **U** D.O.B. - -

ON DUTY ☐ STATUS **9** AIRBAG **9** RESTR. **9** EJECT **9** HELMET USE **9** INJURY CLASS **0** NATURE OF INJURIES

LICENSE PLATE # **36131CV** STATE **WA** VIN# **JN1HZ16S4EX009535**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **1984** MAKE **NISS** MODEL **300ZX** STYLE **CP** VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **JEFFREY JOHNSON 2805 S LAKE STEVENS RD LAKE STEVENS WA 98258 D: 4253343253**

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **EPIC INSURANCE FCFIPP2318736-16** CITATION # CHARGE



OFFICER'S NAME (PRINT) **G. HEINEMANN #133** BADGE OR ID # **#0133** AGENCY **WA0311900**



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E415004**

CASE # **15-00881**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL) **WILLIAMS TONY J**

ADDRESS & PHONE # **333 81ST AVE NE LAKE STEVENS WA 98258 4253351428** SEX **U** D.O.B. **MMDDYYYY 06** - **21** - **1966**

PASSENGER ☐ WITNESS ☒ UNIT # SEAT POS. AIRBAG RESTR. EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

NAME (LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE # SEX D.O.B. MMDDYYYY - -

PASSENGER ☐ WITNESS ☐ UNIT # SEAT POS. AIRBAG RESTR. EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

NAME (LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE # SEX D.O.B. MMDDYYYY - -

PASSENGER ☐ WITNESS ☐ UNIT # SEAT POS. AIRBAG RESTR. EJECT HELMET USE INJURY CLASS NATURE OF INJURIES

NARRATIVE

The driver of Unit 1 was traveling northbound on 81st Ave NE as it approached Unit 2, parked at 331 81st Ave NE. One house to the south of the accident showed tire marks in the yard and disturbed rocks. Unit 1 struck the rear passenger quarter panel of Unit 2 after driving over an embankment of approximately 2 feet. The driveway at 331 81st Ave NE was also damaged from the impact of Unit 1. The driver of Unit 1 continued to fishtail northbound on 81st Ave NE and failed to stay at the scene. A neighbor at 333 81st Ave witnessed a white passenger car fleeing the scene after contact.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

G. HEINEMANN #133

04-06-15 05:36 AM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

DATE

SGT. C. VALVICK 71

4/10/2015 9:04:03 AM

BADGE OR ID # **#0133** ORI # **WA0311900** TIME POLICE DISPATCHED **7:11 PM** TIME POLICE ARRIVED **7:15 PM**



SUPPLEMENTAL
POLICE TRAFFIC
COLLISION REPORT



013197

REPORT NO. **E415004**

CASE # **15-00881**

COMMERCIAL MOTOR CARRIER

INTERSTATE ☐

INTRASTATE ☐

UNIT #

USDOT

ICC #

VEHICLE TYPE

CARGO BODY TYPE

CARRIER NAME

CARRIER ADDRESS

CITY

ST

ZIP

NAME SOURCE

AXLES

GWR

PLACARD

+

NAME IF NO NUMBER

ADDITIONAL UNITS

UNIT #

3

MOTOR VEHICLE ☐

PEDAL-CYCLE ☐

PEDESTRIAN ☐

PROPERTY OWNER ☐

DAMAGE THRESHOLD MET ☒

PHONE

LAST NAME

JOHNSON

FIRST NAME

RICHARD

MIDDLE INITIAL

L

STREET NEW ADDRESS

331 81ST AVE NE

CITY

LAKE STEVENS

ST

WA

ZIP

98258

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S LICENSE #

STATE

SEX

M

D.O.B. MMDDYYYY

09

-

18

-

1928

ON DUTY ☐

STATUS

AIRBAG

RESTR.

EJECT

HELMET USE

INJURY CLASS

NATURE OF INJURIES

LICENSE PLATE #

STATE

VIN#

TRAILER PLATE #

STATE

TRAILER PLATE #

STATE

VEH. YEAR

MAKE

MODEL

STYLE

VEHICLE TOWED YES ☐

TOWED BY

GOVT VEHICLE YES ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐

INSURANCE CO & POLICY #

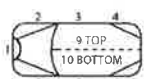
VEHICLE LEGALLY STANDING YES ☐

NO ☐

CITATION #

CHARGE

SHADE IN DAMAGED AREA



UNIT #

3

MOTOR VEHICLE ☐

PEDAL-CYCLE ☐

PEDESTRIAN ☐

PROPERTY OWNER ☐

DAMAGE THRESHOLD MET ☒

PHONE

LAST NAME

FIRST NAME

MIDDLE INITIAL

STREET NEW ADDRESS

CITY

ST

ZIP

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S LICENSE #

STATE

SEX

D.O.B. MMDDYYYY

-

-

ON DUTY ☐

STATUS

AIRBAG

RESTR.

EJECT

HELMET USE

INJURY CLASS

NATURE OF INJURIES

LICENSE PLATE #

STATE

VIN#

TRAILER PLATE #

STATE

TRAILER PLATE #

STATE

VEH. YEAR

MAKE

MODEL

STYLE

VEHICLE TOWED YES ☐

TOWED BY

GOVT VEHICLE YES ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐

INSURANCE CO & POLICY #

VEHICLE LEGALLY STANDING YES ☐

NO ☐

CITATION #

CHARGE

SHADE IN DAMAGED AREA



I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

G. HEINEMANN #133

04-06-15 05:36 AM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST DET

DATED:

PLACE SIGNED

BADGE OR ID #

#0133

ORI #

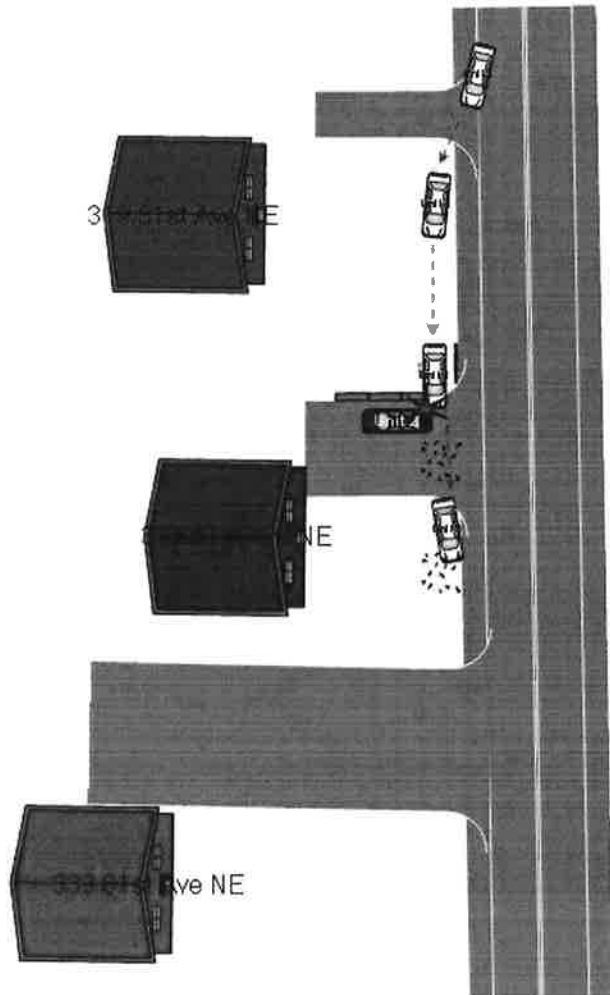
WA0311900

APPROVED BY VALVICK

DATE 4/10/2015

PAGE 3

OF 4



Not To Scale

CRIMINAL <input checked="" type="checkbox"/> TRAFFIC <input type="checkbox"/> NON-TRAFFIC <input type="checkbox"/>		L.E.A. ORI #: WA0311900		COURT ORI #: WA031031J		5Z0471040		REPORT #: 15-00881	
IN THE <input type="checkbox"/> DISTRICT <input checked="" type="checkbox"/> COUNTY OF MARYSVILLE MUNICIPAL COURT		STATE OF WASHINGTON		CITY/TOWN OF LAKE STEVENS		PLAINTIFF VS. NAMED DEFENDANT			
DRIVER'S LICENSE NO. LANT*JC146NH		STATE: WA		EXPIRES: 08-08-19		PHOTO ID MATCHED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		NAME: LANT	
ADDRESS 704 87TH AVE NE #51		RACE W		SEX F		HEIGHT 5'06"		WEIGHT 175	
EMPLOYER		DATE OF BIRTH 08-08-86		INTERPRETER NEEDED <input type="checkbox"/>		AT LOCATION 81ST AVE NE		M.P. 300	
VIOLATION DATE 04/03/2015 21:05		LANG: 		REF. TRAFFICWAY 3RD ST NE		CITY/COUNTY OF LAKE STEVENS/SNOHOMISH			
VEH LIC NO AHM4943		STATE WA		EXPIRES 06-25-15		VEH YR 2004		MAKE PONTIAC	
TR #1 LIC NO		STATE		EXPIRES		TR YR		MODEL SUNFIRE	
OWNER/COMPANY IF OTHER THAN DRIVER		STATE		EXPIRES		TR YR		STYLE COUPE	
ADDRESS		CITY		STATE		ZIP CODE		COLOR WHITE	
ACCIDENT NO INJURY		BAC		COMMERCIAL VEHICLE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		16+ PASS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		HAZMAT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
EXEMPT VEHICLE <input type="checkbox"/> FIRE LEA <input type="checkbox"/>									
1. VIOLATION/STATUTE CODE 46.52.010.2.C		<input type="checkbox"/> D V <input type="checkbox"/> HIT AND RUN UNATTENDED-AID/ABET							
2. VIOLATION/STATUTE CODE		<input type="checkbox"/> D V							
3. VIOLATION/STATUTE CODE		<input type="checkbox"/> D V							
4. VIOLATION/STATUTE CODE		<input type="checkbox"/> D V							
5. VIOLATION/STATUTE CODE		<input type="checkbox"/> D V							
RELATED #		DATE ISSUED 04-04-15		TIME					
MANDATORY COURT APPEARANCE		APPEARANCE DATE							
<input checked="" type="checkbox"/> TICKET SERVED ON VIOLATOR		<input checked="" type="checkbox"/> TICKET REFERRED TO PROSECUTOR							
<input type="checkbox"/> TICKET SENT TO COURT FOR MAILING		<input type="checkbox"/> BOOKED							
CRIMINAL CITATION		You are charged with the crime(s) described on this form. You must respond to the court below.							
MARYSVILLE MUNICIPAL COURT 1015 STATE AVE		MARYSVILLE WA 98270-4301		Traffic citations may go on your driving record.					
Court Contact Info: Phone 1: (360)363-8050				IF YOU DO NOT APPEAR this may result in a warrant for your arrest and detention in jail. Also, if "Traffic" is checked you may lose your driver's license/privilege.					
I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT I HAVE ISSUED THIS ON THE DATE AND AT THE LOCATION ABOVE, THAT I HAVE PROBABLE CAUSE TO BELIEVE THE ABOVE NAMED PERSON COMMITTED THE ABOVE OFFENSE(S), AND I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.		OFFICER G. HEINEMANN #133		# #0133					
OFFICER									

One of the following options applies:

- If there is a **date** in the appearance date box you must appear in court at that date and time.
- If there is a **number** in the appearance date box you must appear in court within the number of days indicated.
- If the appearance date box is **blank**, the court will notify you in writing when to appear. If you do not receive a notice within fifteen (15) days please contact the court immediately.

When you appear, you will be advised of your constitutional rights and the possible penalties if you are convicted. You also may be asked to enter a plea of NOT GUILTY or GUILTY.

IF RCW LISTED APPEARS BELOW PLEASE READ

RCW 46.61.502 Driving Under the Influence (DUI)
drive a motor vehicle and either: have a 0.08 or higher breath or blood alcohol concentration or THC concentration of 5.00 or higher within 2 hours after driving or be under the influence of or affected by liquor, marijuana, or any drug, or a combination of liquor, marijuana, and any drug.

RCW 46.20.342(1)(a) First Degree Driving While Suspended/Revoked (DWLS)
be an habitual traffic offender and drive a motor vehicle while an order of revocation issued under chapter 46.65 RCW prohibiting such operation is in effect.

RCW 46.20.342(1)(b) Second Degree Driving While Suspended/Revoked (DWLS)
drive a motor vehicle while an order of suspension or revocation prohibiting such operation is in effect, and not be eligible to reinstate the license or driving privilege.

RCW 46.20.342(1)(c) Third Degree Driving While Suspended/Revoked (DWLS)
drive a motor vehicle while the license or privilege to drive is suspended or revoked for (1) failure to furnish proof of satisfactory progress in a required alcoholism or drug treatment program; or (2) failure to furnish proof of financial responsibility pursuant to chapter 46.29 RCW; or (3) failure to comply with chapter 46.29 RCW relating to uninsured accidents; or (4) failure to respond to a notice of traffic infraction, failure to appear at a requested hearing, violation of a written promise to appear in court, or failure to comply with the terms of a notice of traffic infraction or citation; or (5) suspension or revocation in another state that would not result in suspension or revocation in this state; or (6) failure to reinstate the driver's license or privilege after suspension or revocation in the second degree; or (7) the person has a suspension under RCW 46.20.267 relating to intermediate driver's licenses, or any combination of the above.

ADDITIONAL NARRATIVE

<small>AGENCY NAME</small> LAKE STEVENS POLICE DEPARTMENT	<small>INCIDENT CLASSIFICATION</small> Hit and Run	<small>INCIDENT NUMBER</small> 15-00881
<small>NAME OF VICTIM(S)</small> Johnson, Jeffrey T		

Narrative:

On April 3rd, 2015 at approximately 1911 hours, I was dispatched to 331 81st Ave NE in the city of Lake Stevens for the report of a hit and run collision, non-injury.

I arrived at 1915 hours to speak with the victim and owner of Unit 2, Jeffrey T. Johnson. Jeff stated that his vehicle (WA #36131CV) was parked in the drive way at this parents' house and was struck by another vehicle that had fled the scene. I immediately noticed tire tracks in the grass yard to the south of Jeff's vehicle, as well as a stacked-rock yard liner damage with tire tracks going through it. The driveway where the crash happened also had a lot of green leaves on it from a bush that the suspect vehicle drove through. Jeff also pointed out that the impact from the suspect vehicle hitting his parent's driveway also caused damage.

As I had Jeff's information added to the call, the owner of the house to the north of Jeff's parents arrived. Tony Williams informed me that he noticed a white passenger car fishtailing out of the area immediately following a loud crash sound. Tony noticed considerable damage to the front wheel well of the white passenger car but could not gather a very good description.

While Jeff and Tony were completing statements, I searched through the debris for a piece with a visible part number. I had negative results but I was able to find what appeared to be part of the plastic wheel cover in the driveway where the collision occurred that I verified was not from the victim vehicle. I gathered this piece and took it in case the suspect vehicle was located. Once all necessary information was collected, I cleared the residence and did an area check for the suspect vehicle.

I was unable to find a possible suspect vehicle in the immediate vicinity to the victim vehicle. On my way out of the neighborhood, at the intersection of Lundeen Parkway and Vernon RD, I noticed a large piece of debris that could possibly be a part from a vehicle. This part was black and appeared to be a piece of an undercarriage or splash guard. I located a part number of 22679475. After several minutes of an area check with negative results, I concluded my search for the suspect vehicle.

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing statement is true and correct.

<small>OFFICER NAME / NUMBER</small> Heinemann/133	<small>APPROVED BY</small> 
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LSPD
ORIGINAL

ADDITIONAL NARRATIVE

AGENCY NAME LAKE STEVENS POLICE DEPARTMENT	INCIDENT CLASSIFICATION Hit and Run	INCIDENT NUMBER 15-00881
NAME OF VICTIM(S) Johnson, Jeffrey T		

Later in the evening I conducted a google search of the part number of the piece of debris and it indicated that the piece was part of a splash guard for one of two vehicles. The search indicated that both the Pontiac Sunfire and Chevy Cavalier (years 2002-2005) are the only two vehicles with this specific part. I continued to research these types of vehicles in the area of Lake Stevens and was able to locate a white Pontiac Sunfire located at 704 87th Ave NE (trailer 51), which is approximately 100-150 yards from the location of the debris in the roadway.

I arrived at this location and immediately noticed a white Pontiac Sunfire in the driveway. Upon first glance, I noticed that the back left tire was blown and there was another black piece of debris in the grass near the vehicle that resembled the piece I located in the roadway nearby. The license plate is WA # AHM4943. There was a gentleman inside of a truck parked at the location as well and I attempted to ask him about the Sunfire. I asked him who the vehicle belonged to and he informed me that it was his daughters. I asked him if she had been involved in a motor vehicle collision sometime in the day and he said "no, it hasn't been driven for 2 weeks". At this time he went inside. I informed him that I would be conducting an investigation to see if the Sunfire matched with the suspect vehicle of a hit and run and he said "ok, let me know".

The registered owner of the white Pontiac Sunfire (WA#AHM4943) is Jaclyn C. Lant.

I was able to further evaluate the vehicle and immediately noticed considerable damage to the front end that was closest to the trailer. I saw that the front passenger tire was also blown and the wheel had damage as well. I gathered the suspected piece of wheel cover debris from the original crash location and attempted to match it with the front passenger wheel. The part fit exactly. I took multiple photographs of the vehicle and had dispatch do a history check for the registered owner to attempt a phone number for contact.

Once I obtained a phone number, I attempted contact. A female voice answered the phone and I asked if it was Jaclyn. The voice indicated yes. I identified myself as a Police Officer and continued to ask questions. I asked if she was the registered owner of a white Pontiac Sunfire and if she was involved in a collision today, she said no to both. I also asked if she still lived at 704 87th Ave NE and she indicated no. I then asked what her last name was and after a pause, she indicated her last name was "Hall". I then concluded the conversation with Jaclyn.

After ending the phone conversation with Jaclyn I attempted to re-contact the father who I previously spoke with. I knocked several times and rang the doorbell with negative results. I noticed in a nearby window that the television on and I could see the male laying on a couch. I

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing statement is true and correct.

OFFICER NAME / NUMBER Heinemann/133	APPROVED BY 
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**LSPD
ORIGINAL**

ADDITIONAL NARRATIVE

AGENCY NAME LAKE STEVENS POLICE DEPARTMENT	INCIDENT CLASSIFICATION Hit and Run	INCIDENT NUMBER 15-00881
NAME OF VICTIM(S) Johnson, Jeffrey T		

attempted to knock on the window and shine my flashlight on him but he ignored me. I could see his eyes were open and he used his left hand to block the light from my flashlight. I waited near my patrol vehicle for approximately 15 minutes before I attempted contact again. This time the male figure got up and went into a back bedroom, still ignoring me. After another 10 minutes the subject finally answered the door. He informed me that he was sleeping. I asked him who the primary driver of the Pontiac Sunfire was and he informed me that his daughter was. He also told me that he does not know of anyone else that drives that vehicle. I asked him where his daughter was and he said she left and went to Marysville. I asked him what a good contact number was and he provided the same number that dispatch had previously provided. I gave the father my business card and told him to have his daughter contact me in regards to the accident. He agreed.

The next business day, I checked my messages and did not have a message from Jaclyn. At approximately 1922 hours on April 5th, 2015 I attempted to contact her again. The phone rang and went to an automated voice message system. The system automatically said "leave a message for" and a human recorded voice immediately after said "Jaclyn Lant".

The voicemail is set up for Jaclyn Lant indicating that Jaclyn gave a false last name when I had previously contacted her.

Attachments

Criminal Citation #5Z0471040 for hit and run.

Photographs of both vehicles and collision site.

Statements

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing statement is true and correct.

OFFICER NAME / NUMBER Heinemann/133	APPROVED BY 
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**LSPD
ORIGINAL**

FOLLOW-UP REPORT

AGENCY NAME LAKE STEVENS	INCIDENT CLASSIFICATION Hit and Run (Unattended)/Giving a false statement	INCIDENT NUMBER 15-00881
NAME OF VICTIM(S) Johnson, Jeffrey T.		

On 04-07-15 at about 0900 I finished reading Officer Heinemann's report. I noticed that the suspect was uncooperative and had lied to Officer Heinemann about who she was when they talked on the phone. Lant told Officer Heinemann her last name was Hall and she denied owning and driving the car that was registered to her. I called Lant's phone number. There was no answer. I left a phone message on her phone at about 0900 hours. I told her that I just reviewed the report and that charges for hit and run are being forwarded to the court, I asked that she call to discuss the incident to give her side of the story.

At about 0905 hours, I received a call from Jaclyn C. Lant. She identified herself then told me that while she was driving her car she dropped her cigarette on her chest and it was burning her and she still has the burn mark. She said that she did go off the road but she thought the only damage done was to her vehicle so she drove home and parked the car. Lant said the reason she drove away was because she was scared.

Lant said that she has been staying with her mother. She told me that she will come in and make a written statement this afternoon.

On 04-07-15 at about 1430 hours, Lant did come into the Police Department to complete a statement. I escorted her and her mother back to the conference room. I advised her of her right with a rights waiver form. She acknowledged that she understood her rights and agreed to write a statement. Her statement matched what she had told me on the phone. She showed me the burn mark on her chest from the cigarette. She handed me her driver's license. I photocopied her driver's license and handed her license back to her. She told me that she would provide proof of insurance and provide a photo of her burn by email. I gave her my card with the case number on it.

At 1625 hours, I received the photograph that Lant lent to my work email. At 1654 I received an email with the insurance information for Lant. See attached.

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing statement is true and correct.

OFFICER NAME / NUMBER Sgt. Brooks #13	APPROVED BY 
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**LSPD
ORIGINAL**

FOLLOW-UP REPORT

<small>AGENCY NAME</small> LAKE STEVENS POLICE DEPARTMENT	<small>INCIDENT CLASSIFICATION</small> Hit and Run (Unattended)/Giving a false statement	<small>INCIDENT NUMBER</small> 15-00881
<small>NAME OF VICTIM(S)</small> Johnson, Jeffrey T.		

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Lant said that she has been staying with her mother. She told me that she will come in and make a written statement this afternoon.

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing statement is true and correct.

<small>OFFICER NAME / NUMBER</small> Sgt. Brooks #13	<small>APPROVED BY</small> 
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LAKE STEVENS POLICE DEPARTMENT

EXPLANATION OF RIGHTS

CASE NUMBER

15-00881

SUSPECT INFORMATION

NAME (LAST, FIRST MIDDLE)	RACE	ETH	SEX	DOB	AGE	HGT	WGT	HAIR	EYES
Lant Jaclyn C.	W		F	8.8.86	29	5'6"	160	BRN	HZL
STREET ADDRESS	CITY	STATE	ZIP	RES. STATUS					
704 87th AVE NE #57	Lake Stevens	WA	98258						
HOME PHONE	CELL PHONE	PLACE OF EMPLOYMENT							
	(425) 330-6437								
WORK PHONE	EMAIL ADDRESS								

BEFORE QUESTIONING OR MAKING OF ANY STATEMENT I, Jaclyn Lant HAVE BEEN ADVISED BY OFFICER/DETECTIVE Sgt. Brooks OF THE FOLLOWING RIGHTS:

INIT <input checked="" type="checkbox"/>	I HAVE THE RIGHT TO REMAIN SILENT
INIT <input checked="" type="checkbox"/>	ANYTHING I SAY CAN BE USED AGAINST ME IN A COURT OF LAW
INIT <input checked="" type="checkbox"/>	I HAVE THE RIGHT AT THIS TIME TO TALK TO A LAWYER AND HAVE HIM PRESENT WITH ME WHILE I AM BEING QUESTIONED
INIT <input checked="" type="checkbox"/>	IF I CANNOT AFFORD TO HIRE A LAWYER, ONE WILL BE APPOINTED TO REPRESENT ME BEFORE ANY QUESTIONING, IF I WISH
INIT <input checked="" type="checkbox"/>	I CAN DECIDE AT ANY TIME TO EXERCISE THESE RIGHTS AND NOT ANSWER ANY QUESTIONS OR MAKE ANY STATEMENTS
INIT <input type="checkbox"/>	IF I AM UNDER THE AGE OF 18, ANYTHING I SAY CAN BE USED AGAINST ME IN A JUVENILE COURT PROSECUTION FOR A JUVENILE OFFENSE AND CAN ALSO BE USED AGAINST ME IN AN ADULT COURT CRIMINAL PROSECUTION IF I AM TO BE TRIED AS AN ADULT

I UNDERSTAND MY CONSTITUTIONAL RIGHTS. I HAVE DECIDED NOT TO EXERCISE THESE RIGHTS AT THIS TIME. ANY STATEMENTS MADE BY ME ARE MADE FREELY, VOLUNTARILY, AND WITHOUT THREATS OR PROMISES OF ANY KIND.

SIGNATURE: Jaclyn Lant DATE: 4.7.15 LOCATION: _____

On Friday night 4.3.15 I was returning home from work I had dropped a cigarette down my shirt which caused me to sneezed off thought I had only hit rocks and damaged my tire so I had returned home.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE:	DATE SIGNED	LOCATION SIGNED
<u>Jaclyn Lant</u>	<u>4.7.15</u>	<u>LK. Stevens</u>
OFFICER/NUMBER	DATE SIGNED	LOCATION SIGNED
<u>36118</u>	<u>il</u>	<u>u</u>

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE ____ OF ____

WASHINGTON INSURANCE IDENTIFICATION CARD

Vern Fonk Insurance Services Inc
3531 Rucker Ave N
Everett, WA 98201

Company Number Company

31488 National General Insurance Company

Policy Number

Effective Date

Expiration Date

2002885561-00

10/17/2014

10/17/2015

Coverage provided by this policy meets the minimum liability limits prescribed by law.

Named Insured

LANT, JACLYN C

704 87TH AVE NE TRLR 51

LAKE STEVENS, WA 98258

Yr/Make/Model

VIN

Broad Form Policy

THIS CARD MUST BE CARRIED IN INSURED
VEHICLE TO BE PRESENTED UPON DEMAND

IF YOU HAVE AN ACCIDENT: Report all accidents to your
Agent/Company as soon as possible. Before calling,
obtain the following information:

- Name and address of each driver, passenger and witness.
- Name of Insurance Company and policy number for each vehicle involved.

Company / Claim Phone Number

**National General Insurance Company /
800-468-3466**

Insurance Agency / Phone Number

**Vern Fonk Insurance Services Inc
425-258-5900**

Printed by LSB on April 07, 2015 at 04:14PM

LEPD
ORIGINAL

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

15-00881

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE)	RACE	ETH	SEX	DOB	AGE	HGT	WGT	HAIR	EYES	
	Johnson Jeff Todd	W		M	3-17-1953	53	5-11	240	BR	BL	
STREET ADDRESS		CITY		STATE		ZIP		RES. STATUS			
2805 S LK Steven Rd		Lake Steven		WA		98288		✓			
HOME PHONE		CELL PHONE		PLACE OF EMPLOYMENT							
425-334-3253		425-308-7899									
WORK PHONE		EMAIL ADDRESS									
425-308-7899											

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

Hear a loud crash looked out didn't notice my car but folks neighbor came over and saw a white car fish taling away with severe front end damage leaving the site

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE:	DATE SIGNED	LOCATION SIGNED
Jeff Johnson	4-3-15	331 81 st AVE NG
OFFICER/NUMBER:	DATE SIGNED	LOCATION SIGNED
HSEINAWAN/133	4-4-15	ISPD

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

ORIGINAL

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

15-00821

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Williams Tony J.	RACE W	ETH	SEX M	DOB	AGE 48	HGT 510	WGT 220	HAIR grey	EYES blue
STREET ADDRESS 333 81st Ave NE		CITY Lake Stevens			STATE WA	ZIP 98258	RES. STATUS			
HOME PHONE 425-335-1428		CELL PHONE 253 208 5515			PLACE OF EMPLOYMENT retired					
WORK PHONE		EMAIL ADDRESS								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I herd a smash and looked out my window of my home and saw a white import type car with a lot of damage to the wheel well area of the front end the car was fishtailing as it went by my house.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE:

Tony J. Williams
HEINEMANN / 133

DATE SIGNED

4-3-16

LOCATION SIGNED

Home

DATE SIGNED

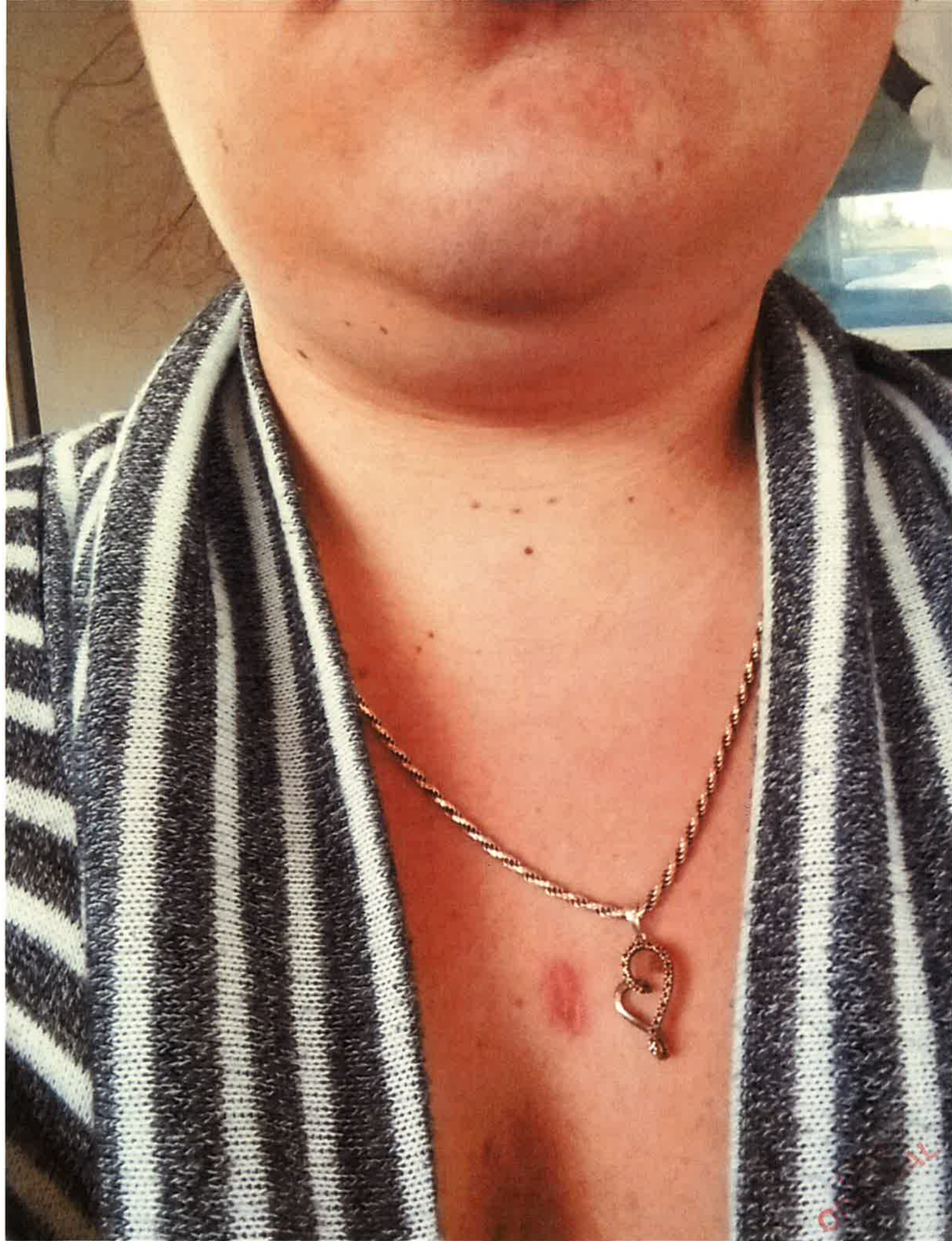
4-4-15

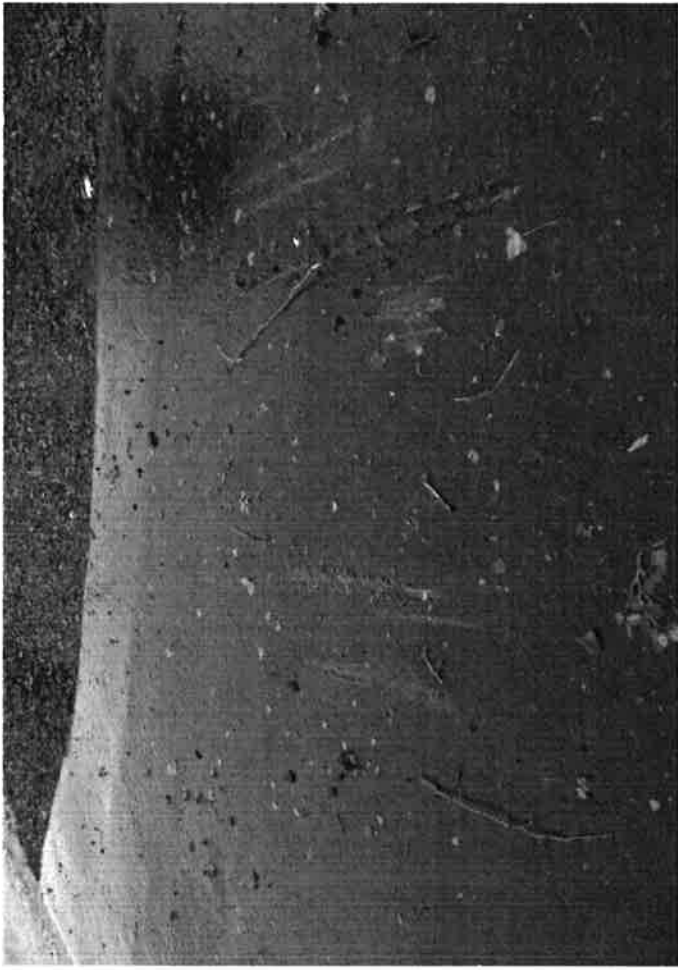
LOCATION SIGNED

LSPD

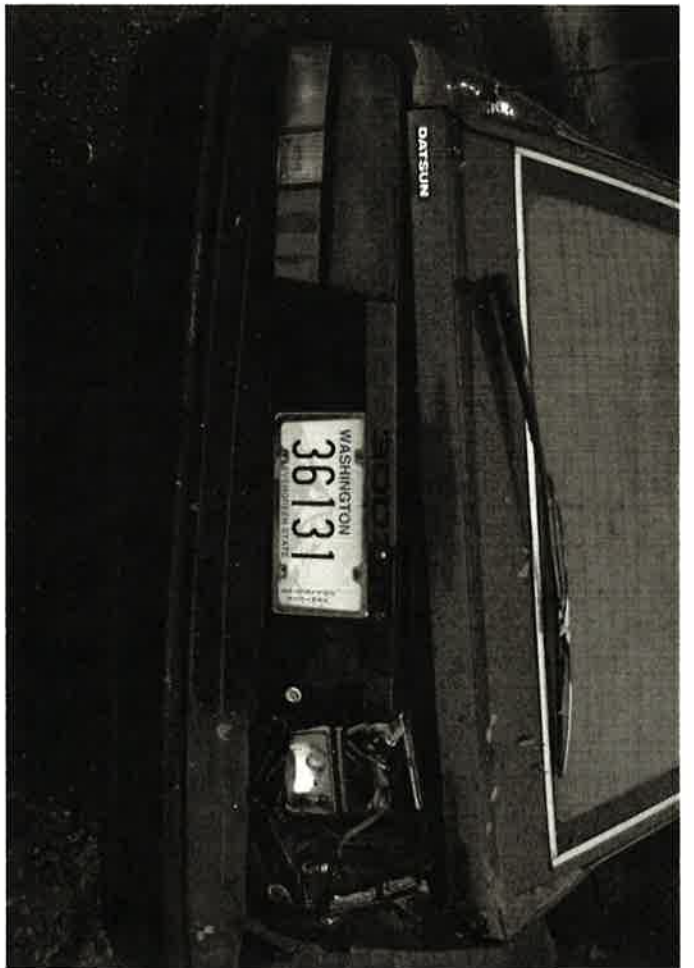
"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1



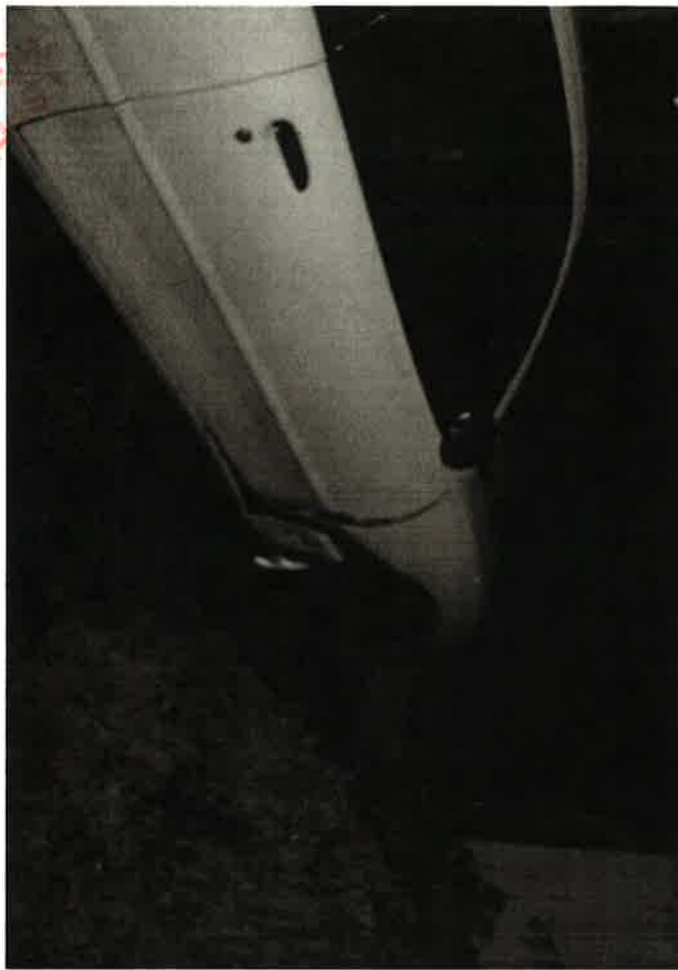


4/11/82
10:00 PM
100-100000

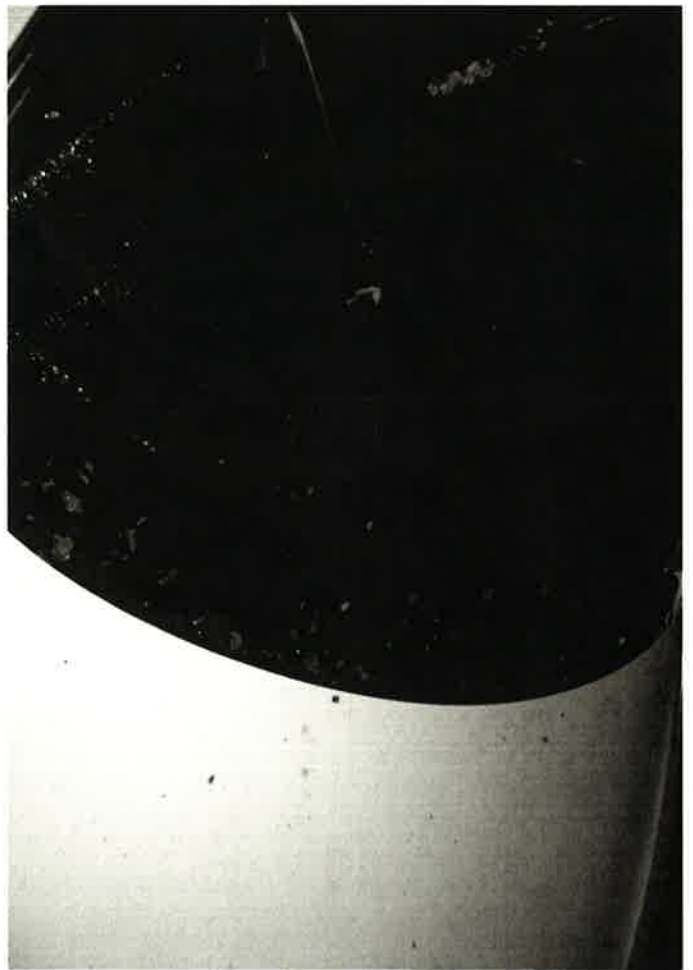




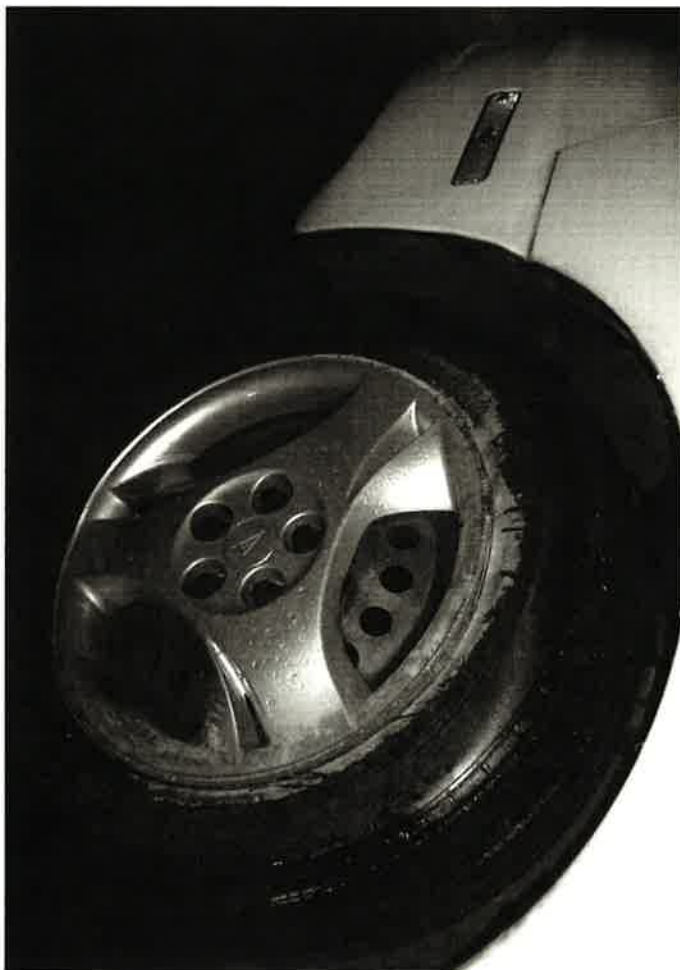
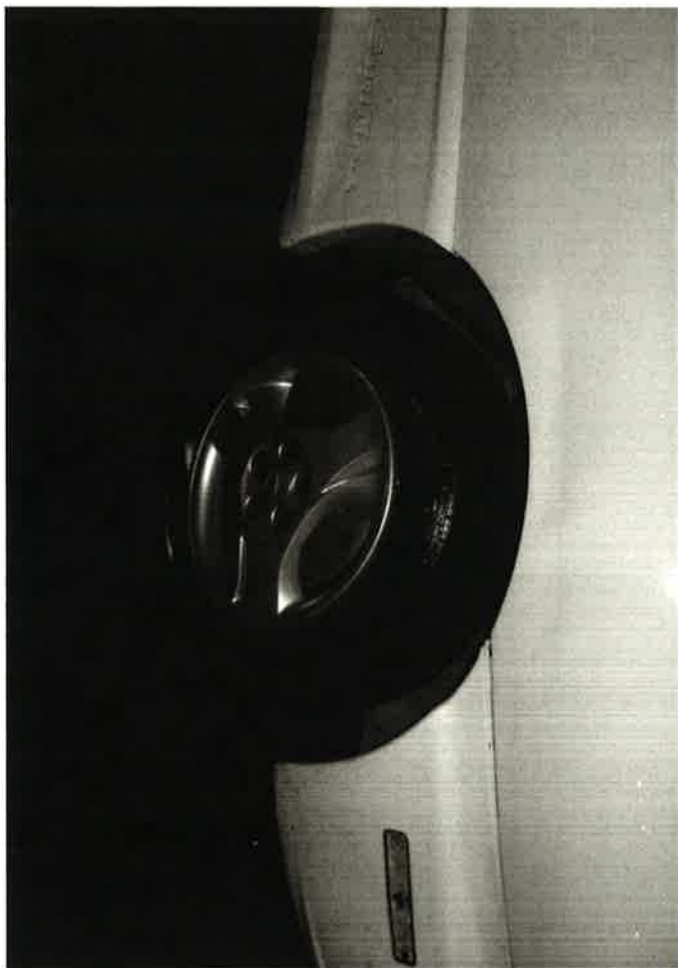
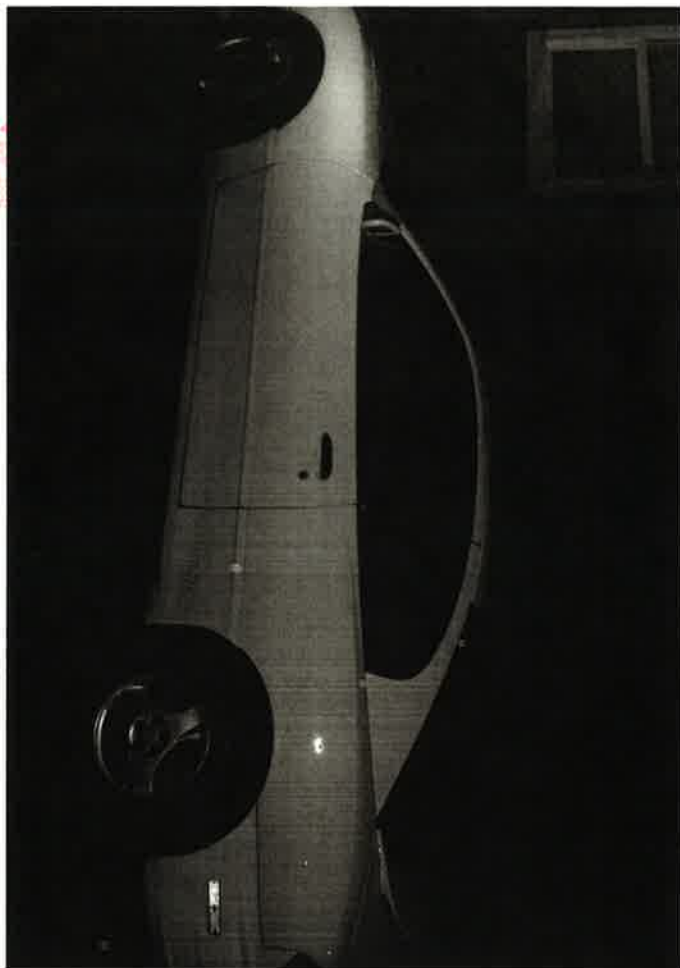
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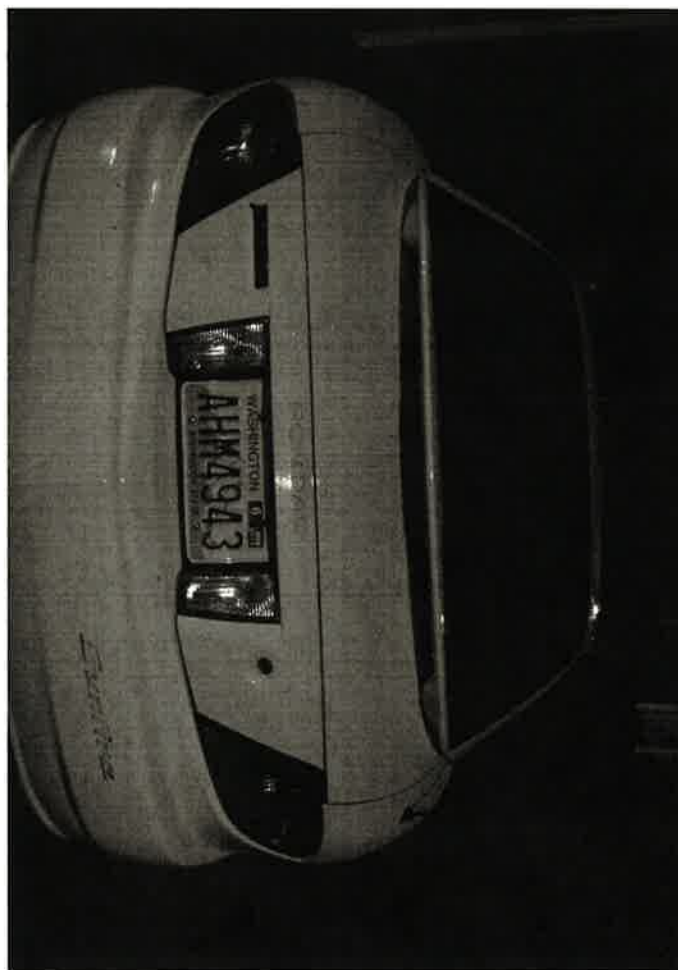
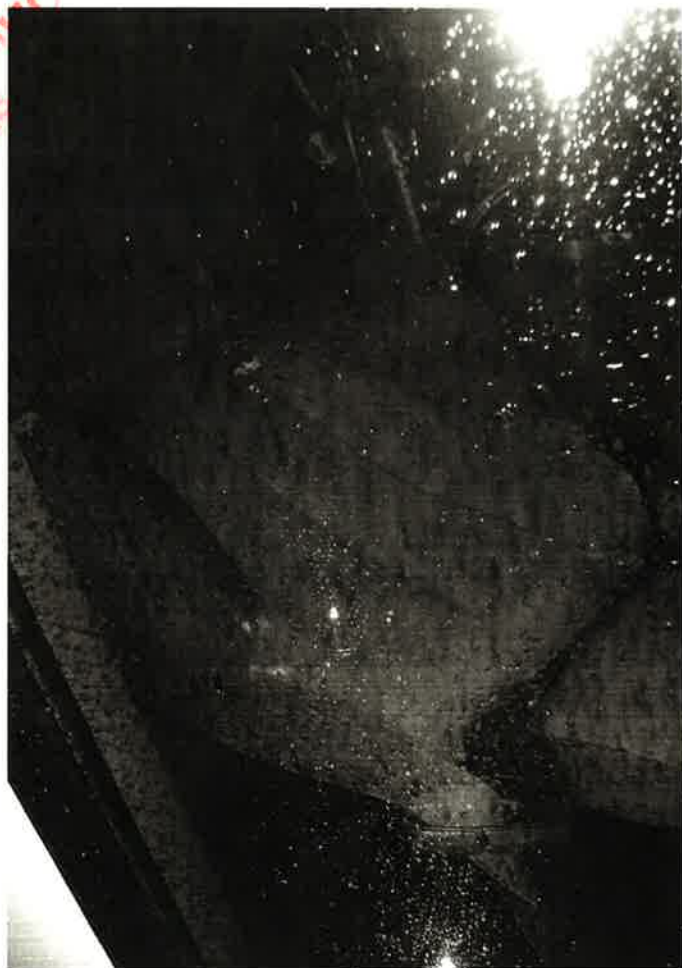
ORIGINAL



7442



Training
200



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LAKE STEVENS POLICE EVIDENCE UNIT		Primary Officer/Badge Number <i>HEINEMANN/133</i>		Case Number <i>15-00881</i>	
Type of Crime: Felony / Misdemeanor (Circle)		Type of Case: <i>HIT & RUN</i>		Date/Time: <i>4/3/15 1905</i>	
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING		*Evi will be held until court dispo or when the Statute of Limitations has expired *Found and Sfkg will be held for 60 days or 60 days past owner notification			

Case # 15-00881

Item # Action #	1	Item: <i>PHOTOGRAPHS ON CD</i> Brand/Model/Caliber: _____ (Further Description)	Storage Location	Disposition
	3	Serial #: _____ Where Found: _____ Weight of Narcotic: _____		
	Owner's Name: _____ Address: _____ City: _____ State: _____ Zip: _____ Phone #: _____			
Owner Signature/Other remarks /additional information/ special instructions				Barcode goes here
Item # Action #		Item: _____ Brand Name: _____ Brand/Model/Caliber: _____ (Further Description)	Storage Location	
		Serial #: _____ Where Found: _____ Weight of Narcotic: _____		
	Owner's Name: _____ Address: _____ City: _____ State: _____ Zip: _____ Phone #: _____			
Owner Signature/Other remarks /additional information/ special instructions				Barcode goes here
Item # Action #		Item: _____ Brand Name: _____ Brand/Model/Caliber: _____ (Further Description)	Storage Location	
		Serial #: _____ Where Found: _____ Weight of Narcotic: _____		
	Owner's Name: _____ Address: _____ City: _____ State: _____ Zip: _____ Phone #: _____			
Owner Signature/Other remarks /additional information/ special instructions				Barcode goes here
Item # Action #		Item: _____ Brand Name: _____ Brand/Model/Caliber: _____ (Further Description)	Storage Location	
		Serial #: _____ Where Found: _____ Weight of Narcotic: _____		
	Owner's Name: _____ Address: _____ City: _____ State: _____ Zip: _____ Phone #: _____			
Owner Signature/Other remarks /additional information/ special instructions				Barcode goes here
Item # Action #		Item: _____ Brand Name: _____ Brand/Model/Caliber: _____ (Further Description)	Storage Location	
		Serial #: _____ Where Found: _____ Weight of Narcotic: _____		
	Owner's Name: _____ Address: _____ City: _____ State: _____ Zip: _____ Phone #: _____			
Owner Signature/Other remarks /additional information/ special instructions				Barcode goes here

Evidence Control Use Only:				
Received by Evidence:	NCIC/WACIC <input checked="" type="checkbox"/>	Date: _____	CAD/RMS Checked	ROUTING: _____
Name: _____ # _____	NCIC/WACIC +	Date: _____	Owner Letter Sent:	White: Property Room
Date: _____ Time: _____	NCIC/WACIC -	Date: _____	Owner Letter Sent:	Yellow: Case File

Incident History for: #SS15006403

Entered 04/03/15 21:39:39 BY SPDP17 SP0194
Dispatched 04/03/15 21:39:39 BY SPDP17 SP0194
Enroute 04/03/15 21:39:39
Onscene 04/03/15 21:39:39
Closed 04/03/15 22:27:43

Initial Type: FLUP Initial Alarm Level: Final Alarm Level:

Final Type: FLUP (FOLLOW-UP) Pri: 4 Dispo: M

Police BLK: SS002 Fire BLK: AG1518 Map Page: 377D-7 Group: SS1 Beat: Src

Loc: 704 87 AV NE #51 ,LKS -- MHP WESTVIEW ESTAT btwn VERNON RD & 87 AV NE (V)

Loc Info:

Name: Addr: Phone:

/2139 (SP0194) \$OUTSRV ,NO MORE INFORMATION
/2139 DISPOS 19N3 #SS133 HEINEMANN,OFFICER (GAVIN)
 ,NO MORE INFORMATION
/2139 CONTCT 19N3 Contact in 10 Minutes
/2142 (*****) REMINQ 19N3 AHM4943
/2142 (SP0194) REMINQ 19N3 LIC, 19N3, AHM4943,,
/2142 (*****) REMINQ 19N3 LANT. JACLYN. C. 08081986..
/2142 (SP0194) REMINQ 19N3 NAME, 19N3, LANT, JACLYN, C, 08081986,,
/2143 CONTCT 19N3 Contact in 10 Minutes
/2143 CHANGE 19N3 LOC: 704 87 AV NE #51 --> 704 87 AV NE #51 ,LKS
 ,
BLK: --> SS002
/2150 (*****) REMINQ 19N3 B060610H
/2150 (SP0331) REMINQ 19N3 LIC, 19N3, B060610H,,
/2151 (SS133) REMINQ 19N3 MDTVEH, B06010H,, WA,,,,,,,,,
/2152 REMINQ 19N3 MDTVEH, AHM4943,, WA,,,,,,,,,
/2153 (SP0331) CONTCT 19N3 Contact in 10 Minutes
/2154 (*****) REMINQ 19N3 B06010H
/2154 (SP0331) REMINQ 19N3 LIC, 19N3, B06010H,,
/2159 (*****) REMINQ 19N3 AHM4943
/2159 (SP0331) REMINQ 19N3 LIC, 19N3, AHM4943,,
/2203 (SP0194) ASSTOS 19N2 [704 87 AV NE #51 ,LKS]
 #SS126 HINGTGEN,OFFICER (MICHAEL)
/2203 CONTCT 19N3 Contact in 10 Minutes
/2203 OK 19N2
/2212 (SS126) REMINQ 19N2 MDTWANT, LANT, CRAIG, M, 021854,, WA,,,,,,,,,
/2216 (SP0194) CONTCT 19N3 Contact in 10 Minutes
/2226 CONTCT 19N3 Contact in 10 Minutes
/2227 CLEAR 19N3 D/M
/2227 CLEAR 19N2
/2227 CLOSE 19N2

LSPD
ORIGINAL

Incident History for: #SS15006390

Case Numbers: \$SS15000881

Received 04/03/15 19:09:31 BY SPCT08 SP0368
Entered 04/03/15 19:10:58 BY SPCT08 SP0368
Dispatched 04/03/15 19:11:09 BY SPDP17 SP0194
Enroute 04/03/15 19:11:09
Onscene 04/03/15 19:15:29
Closed 04/03/15 19:35:23

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 3 Dispo: H

Police BLK: SS002 Fire BLK: AG1517 Map Page: 397C-1 Group: SS1 Beat: WEST

Src: 9

Loc: 331 81 AV NE ,LKS btwn 81 AV SE & VERNON RD (V)

Latitude: (+) 47.999761 Longitude: (-) 122.121556

Loc Info:

Name: JOHNSON, JEFF

Addr:

Phone: 4253342057

/1910 (SP0368) ENTRY , CC, 5AGO H&R , FLEEING VEH WHI SEDAN NL
/1911 (SP0194) DISPER 19N2 #SS126 HINGTGEN, OFFICER (MICHAEL)
/1911 ASSTER 19N1 #SS102 PLANALP, OFFICER (DANIEL)
/1911 CLEAR 19N2
/1911 \$PREMPT 19N1
/1911 \$DISPER 19N3 #SS133 HEINEMANN, OFFICER (GAVIN)
/1911 PREDSP 19N1 19N3
/1915 (SS133) *ONSCNE 19N3
/1918 *MISC 19N3 , JOHNSON, JEFFREY TODD 031762
/1919 REMINQ 19N3 MDTWANT, JOHNSON, JEFFREY, T, 031762,,,WA,,,,,,,,,
,,
/1922 (*****) REMINQ 19N3 36131CV
/1922 (SP0194) REMINQ 19N3 LIC, 19N3, 36131CV,,
/1930 ASNCAS 19N3 \$SS15000881
/1933 (SS133) *MISC 19N3 , EPIC INSURANCE POL# FCFIPP2318736-16
/1935 *MISC 19N3 , 331 81ST AVE NE, PARENTS HOUSE WHERE COLLISION
OCCURED
/1935 *CLEAR 19N3 D/H
/1935 CLOSE 19N3

LS90
SIGNAL